

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-Elect Bill Lyon (Scott Co.)

IMPORTANT: Indicate type of committee you are reporting for:

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee

CANDIDATE COMMITTEES ONLY:

Candidate Name

BILL LYON

Political Party

N/A

Office Sought

FIFTH WARD ALDERMAN

District (if Senate or House)

FORM

DR-2

(Rev. 07/2003)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____
Logged In _____
Scanned _____
Computer _____
Audited _____

Adrian K. Lyon
SIGNATURE OF TREASURER (or person filing this report)

523-326-3746
TELEPHONE

1-22-08
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 1-22-08 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate one ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 1,619.32

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1,550.00

Schedule F: Loans Received total (Attach Schedule F)

- 0 -

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0 -

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 3,169.32

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1,113.17

Schedule F: Loan Repayments total (Attach Schedule F)

- 0 -

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$ 2,056.15

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for the - Clerk Bill Lynn (SCOT)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B 32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/2/07	ID# CK#	Stephen Schalk 310 Main St Davenport, IA 52803		\$ 100.00	<input type="checkbox"/>
11/2/07	ID# CK#	David Requet 34 Willowbrook Dr Moline, IL 61265		250.00	<input type="checkbox"/>
11/2/07	ID# CK#	Joe Polaschek 510 Main St Davenport, IA 52803		50.00	<input type="checkbox"/>
11/3/07	ID# CK#	John Bliss 4436 N. Linwood Ave. Davenport, IA 52806		250.00	<input type="checkbox"/>
11/5/07	ID# CK#	Moslem H K Hater 401 E. Locust Davenport, IA 52803		500.00	<input type="checkbox"/>
11/6/07	ID# CK#	Regina Lehn 3829 1043rd Ave. Ct, W Moline, IL 61264		200.00	<input type="checkbox"/>
11/6/07	ID# CK#	Rhonda O'Brien 1312 Eagles Crest Ave Davenport, IA 52804		250.00	<input type="checkbox"/>
11/6/07	ID# 6005 CK# 2192	ABC 415 Alices Rd, Sk. A Waukegan, IL 50263		100.00	<input type="checkbox"/>
11/7/07	ID# CK#	Alice Wilcox 1224 Esplanade Ave Davenport, IA 52803		25.00	<input type="checkbox"/>
11/20/07	ID# CK#	Gary Nolan 2323 Armit RL Davenport, IA 52804		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1550.00	
TOTAL (If last page of this schedule)				\$ 1550.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-Elect Bill Lynn (Scott Co)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/1/07	ID# CK#	Bullseye 537 E. 53rd St. #B Davenport, IA 52807	Bulk mailing for 2 campaign mailers	\$ 467.88
12/2/07	ID# CK#	BILL Lynn 1935 Walling Cr. Davenport, IA 52803	Reimbursement for paper, envelopes, postage, booklets, camp cards, etc. for Campaign - Schedule B	281.65
12/2/07	ID# CK#	Arbata Lynn 1935 Walling Cr. Davenport, IA 52803	Reimbursement for printing & bulk mailing per Schedule D	363.64
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1113.17
TOTAL (If last page of this schedule)				\$ 1113.17

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i))

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(for Schedule B)